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## ABSTRACT

Teenage and/or adolescent pregnancy is on the increase in most American cities and age of first pregnancy within this group is declining rapidly. In this study, sexual attitudes and knowledge among black inner-city elementary school students is documented. The effectiveness of a six week sex education class designed to provide these students with basic knowledge of human sexuality is evaluated by means of a modified Schiller Sex Inventory which was administered to fifth and sixth graders before and after the course. Data indicate that there was a significantly greater number of correct responses after students had completed the course. Participant involvement in the evaluative process led researchers to conclude that after the completion of the program in sex education students: (1) developed healthier and more positive sexual attitudes; (2) had a greater knowledge of sex organs, core gender and their own sexual identity; (3) displayed willingness to approach parents about questions related to sex; and (4) increased their knowledge of birth control information and contraceptive practices. (Author/WI)

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SEXUAL ATTITUDES AND KNOWLEDGE  
AMONG BLACK INNER CITY ELEMENTARY  
SCHOOL STUDENTS IN PHILADELPHIA:  
A PILOT STUDY

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INTRODUCTION

Instruction in human sexuality, to some degree, has always taken place in public education, but in recent years, the sexual revolution and the resultant rise in rates of illegitimacy and venereal disease have generated the development of numerous courses designed for students at all age levels (Powledge, 1977). At the same time, token resistance and/or rigid opposition to sex education programs have increased rapidly (Clawar, 1977; Milwaukee Journal, 1978a).

Despite the controversial nature of sex education, instruction in the area of human sexuality has continued. An aspect of this development has been the acknowledgement by contemporary educators that there is a growing need for sex and/or birth control education in the elementary school. As a result, numerous sex education programs at the elementary school level have been initiated (Pelham, 1975; Weaver, 1978a and b). However, the evaluation of these programs, particularly for black inner city youth, has been amorphous or non-existent. This has been due, in part, to the lack of clarity in the objectives for sex education curricula and to the inconsistency in preparation of teachers in this curricular area. Numerous writers have addressed themselves to the latter problem (Clawar, 1977; Powledge, 1977; Hutchins, 1977).

The purpose of this study was to determine the effectiveness of a six-week sex education course that was taught to fifth and sixth graders in an inner city elementary school in Philadelphia, Pennsylvania. The objectives of the course were 1) to provide basic information about human sexuality and 2) to change negative and/or stereotypical sexual attitudes.

## RELATED LITERATURE

The following review focuses on the rise in teenage pregnancies and the concerns about sex education in the public schools.

Liberalized abortion laws, improved birth control methods and government family planning programs have contributed to a dramatic drop in the overall birth rate; nevertheless, these factors have had little effect on the sexual behavior of the teenage girl (Pelham, 1975). Approximately 1,000,000 adolescent girls become pregnant every year, and the birthrate is increasing among girls 14 years old and younger (Baldwin, 1976, p. 8; Fosburgh, 1977). The previously held assumption that only the poor and the black make up these statistics is no longer valid (Fosburgh, 1977) as adolescents from suburban middle-class neighborhoods are exhibiting high rates of illegitimacy (Franklin, 1977).

Planned Parenthood, in a report on teenage pregnancy, has labeled the contemporary problem, "epidemic" (Fosburgh, 1977) particularly among 9-15 year-old white females (New York Times, 1977). Professors John Kanter and Melvin Zelnik of the Johns Hopkins School of Hygiene and Public Health have concluded that the trends "are a result of increased sexual activity among teenagers that has more than overcome the easier access to contraception" (Reinhold, 1977). This phenomenon is also exacerbated by a decline in the age of sexual maturity--well known to anthropologists as the "secular trend." In 1840, the average young woman in the United States and Europe menstruated for the first time at age seventeen whereas her modern counterpart begins menstruation at age twelve; furthermore, the average age of first menstruation is continuing to decline at the rate of four months per decade (Konner, 1977).

There are diverse reasons for this increased sexual activity among adolescents: One young mother indicated that she never used any birth

control because she heard that the pill caused cancer (Fosburgh, 1977), while another felt that it (the pill) would cause one to have intercourse too frequently (Pelham, 1975). Many others are completely unaware of any kind of birth control methods or any aspect of their sexuality (Goodman, 1977). Moreover, many researchers of teenage sexuality have generally agreed that mistreated teenagers and those whose parents do not communicate with them on sexual matters are more likely than others to become pregnant (Litterine and Schogol, 1977; Fosburgh, 1977). Others have concluded that "the younger ones may have all kinds of unconscious motivations for getting pregnant, but there has not been enough research for us to really know what's happening" (Litterine and Schogol, 1977). Nonetheless, it has been confirmed that: 1) teenage mothers under 15 years of age have a 60 percent higher death rate as a result of complications in pregnancy; 2) babies of teens are twice as likely to die in the first year; and 3) fathers of these babies very rarely provide financial or emotional support to the teen mothers (Fosburgh, 1977; Hutchins, 1977; Franklin, 1977). "As to the girls themselves whether married or unmarried, their motherhood leads them into total dependence on their families or the welfare system and ends up denying them a solid chance of finishing school, getting a meaningful job or extricating themselves from a cycle of dependency or distress. Their future prospects, experts maintain, are singularly bleak" (Fosburgh, 1977; p. 30). Consequently, in view of this situation, it is clear that effective sex education or some other viable alternative to present conditions is needed.

Murray Kappelman (1978), author of *SEX AND THE AMERICAN TEENAGER*, has observed that for today's teenager, "the sexual revolution is over and that sex has won!" He has concluded that parents must take the initiative in educating their children about their (the children's) sexuality in contemporary society. Parents must recognize and accept adolescent sexuality as

the new subculture. Sol Gordon (1978), professor of child and family studies at Syracuse University, concurs with Kappelman and urges us to provide our adolescents with sexual knowledge and positive sexual attitudes as this kind of preparation is needed for tomorrow's family. He has also initiated the "lines project" in sex education in which he apprises teenage females of the numerous approaches--come-ons--utilized by their male counterparts in the seduction process (Wedemeyer, 1977). Gordon feels that this knowledge will make it easier for young females to reject sexual advances. Eunice Kennedy Shriver (1977) has documented the desire of teenage girls to find ways to say no to the sexual demands of their boyfriends. She has advocated the strengthening of the family role in sex education rather than a reliance on technological solutions to adolescent sexuality. Although most Americans would prefer that sex education be taught in the home, the increasing rates of adolescent pregnancy suggest rather strongly that parents are either unwilling or unable to shoulder this responsibility (Hutchins, 1977; Philadelphia Bulletin, 1977; Milwaukee Journal, 1978b).

More recently, the disproportionately negative impact of adolescent pregnancy on the development of the black community has received closer scrutiny (Baldwin, 1976; Milwaukee Journal, 1978c). Francis Hutchins (1977), Director of the Family Planning Center at Temple University, has encouraged Afro-Americans to look to their own resources "since it would be unrealistic to expect this society to break with tradition and show significant concern for issues affecting a non-white minority." June Dobbs Butts (1977), of the Masters and Johnson sex clinic in St. Louis, has reasoned that since inner-city black children are literally bombarded by an active survival-oriented culture, all adults in the black community "owe our children the accuracy of scientific information and the emotional security which only comes from meaningful experience." Given the disproportionate number of

Illegitimate black births, particularly in urban areas (Milwaukee Journal, 1978c), it is exceedingly urgent that Afro-Americans take leadership in developing and evaluating human sexuality programs in their respective communities.

#### PROCEDURES

Subjects for the study were black fifth and sixth grade students enrolled in the Price Hall Elementary School (a predominantly black inner-city school in the West Oak Lane Section of Philadelphia, Pennsylvania) for the 1976-77 school year. The population served by the school represented a mixed socio-economic group ranging from working to middle class, with many of the families receiving public assistance. The sex education curriculum is only one of the innovative educational programs that the school's principal, a black female, has initiated in response to the diverse educational and social needs of the school's community.

Since the aim of the pilot project was to assess the sexual knowledge and attitudes of black elementary school students before and after a six-week sex education course, our analysis was intentionally limited to a description of the students' responses to specific statements, adapted from the AASECT sex inventory (Schiller, 1974), which reflect their perceptions of some common notions about sexually relevant behavior and attitudes. It should be noted, however, that these questions do not represent the full parameters of the information provided. The second level of evaluation of the sex education class was undertaken under the guise of "participant involvement" wherein the researchers periodically observed and interacted with the students during the development of the program. A pretest/posttest (one group) pre-experimental design was utilized (Campbell, 1963, p. 7) which enabled us to determine the change in the students' perceptions

before and after being exposed to the six-week sex education course instituted by the school nurse. Therefore, while the findings to be reported are illustrative, they also serve as a guide in moving toward a more refined control-group type experimental design to investigate this relatively unexplored topic.

## RESULTS

Student responses to each of the sex attitude and knowledge items before and after participation in the sex education course are presented in Table 1. For four of the ten statements, there was a 20 percent or greater change in the proportion of students responding "yes" or "no" before and after exposure to sex education. In the pretest, forty-four percent of the students agreed with the statement that "All teenage boys have wet dreams at one time or another," while close to 80 percent felt this was true after exposure to sex education. While only 59 percent initially agreed that "girls grow up (mature) sooner than boys," 85 percent accepted this statement after the course. The before-after change in agreement that a baby grows in its mother's stomach was 41 percent. Even though 36 percent of the students initially accepted the stereotype that homosexuals are crazy, after sex education approximately 74 percent rejected this notion. There was a less dramatic but also substantial before-after difference between the proportion of students who believed that "girls should not take showers when their period is on" (11 percent change) and "every time a female has sex she will become pregnant" (15 percent change). There was only a slight change (less than 10 percent) in responses to the following statements: "It is all right for boys and girls to play with themselves," (6 percent change), "Venereal Diseases are spread by having sex with a person who has a disease" (9 percent change), "Kids who are cool have sex" (2 percent change), and "A woman can

**TABLE 1**  
**Sex Attitudes and Knowledge of Inner City Black Youth**  
**(Before and After Sex Education Program)**

| Statement                                                                   | Before (N=54)* |      |               |         | After (N=54) |      |               |         | Change<br>(% "yes"<br>Response) |
|-----------------------------------------------------------------------------|----------------|------|---------------|---------|--------------|------|---------------|---------|---------------------------------|
|                                                                             | Yes            | No   | Don't<br>Know | Total % | Yes          | No   | Don't<br>Know | Total % |                                 |
| It is all right for boys and girls to play with themselves (masturbate).    | 20.4           | 64.8 | 14.8          | 100.0   | 14.8         | 75.9 | 9.3           | 100.0   | -5.6                            |
| Girls grow up (mature) sooner than boys.                                    | 58.5           | 26.4 | 15.1          | 100.0   | 85.2         | 11.1 | 3.7           | 100.0   | 26.7                            |
| Homosexuals are crazy.                                                      | 35.8           | 35.8 | 28.3          | 99.9    | 15.1         | 73.6 | 11.3          | 100.0   | 20.7                            |
| Every time a female has sex she will become pregnant.                       | 29.6           | 55.6 | 14.8          | 100.0   | 14.8         | 83.3 | 1.9           | 100.0   | 14.8                            |
| All teenage boys have "wet dreams" at one time or another.                  | 44.4           | 16.7 | 38.9          | 100.0   | 79.6         | 9.3  | 11.1          | 100.0   | 35.2                            |
| Girls should not take showers when their "period is on."                    | 22.2           | 37.0 | 40.7          | 99.9    | 33.3         | 35.2 | 31.5          | 100.0   | 11.1                            |
| Kids who are "cool" have sex.                                               | 25.9           | 42.6 | 31.5          | 100.0   | 24.1         | 59.3 | 16.6          | 100.0   | 1.8                             |
| A woman can tell whether her baby will be a boy or girl before it is born.  | 18.5           | 66.7 | 14.8          | 100.0   | 16.7         | 77.8 | 5.5           | 100.0   | 1.8                             |
| The baby grows in its mother's stomach.                                     | 35.1           | 61.1 | 1.8           | 98.0    | 75.9         | 22.2 | 0             | 98.1    | 40.8                            |
| Venereal Diseases are spread by having sex with a person who has a disease. | 85.1           | 3.7  | 11.1          | 99.9    | 94.4         | 3.7  | 0             | 98.1    | 9.3                             |

\* Due to non-responses on some statements N's do not total to 100%.

\*\* Negative values indicate fewer "yes" responses after sex education course.

tell whether her baby will be a boy or girl before it is born" ( 2 percent change).

To assess the overall change in the students' perceptions of sexually relevant attitudes and behavior before and after exposure to the sex education course, each student was given a score of one for a "correct" response to each item in terms of its acceptance by sex educators, counselors and other medical personnel. The T-test of difference between means was used to assess the significance between the average number of correct responses by students before and after participation in the sex education course. As Table 2 shows, the mean number of correct responses after the course was significantly greater than the "before" average (before = 5.18, after = 6.37,  $df = 106$ ,  $T = 3.86$ ,  $P .001$ ).

While it cannot be determined on the basis of these findings whether the magnitude and direction of change in knowledge and attitudes among inner-city black students was due directly to the effect of the sex education course, there is sufficient evidence to suggest that more extensive research is warranted.

#### IMPLICATIONS AND PROSPECTS

The subjective aspect of this evaluative process (participant involvement) led the researchers to conclude that the students, after completion of the program, 1) developed more positive and healthy sexual attitudes and knowledge of sexual organs, core gender, and identity; 2) displayed a willingness to approach parents about questions on human sexuality; and 3) increased their knowledge of birth control information and contraceptive practices. Elsewhere, Woody (1973) has affirmed the need for this type of attitude development.

As indicated earlier, the pre- and post-evaluation of sexual attitudes and knowledge was not as detailed as that provided in the course. This

TABLE 2

Average Number of Appropriate Perceptions Before  
and After Sex Education Program

|        | Mean | Standard<br>Deviation | Degrees of<br>Freedom | T     | Significance<br>(Two-tailed Test) |
|--------|------|-----------------------|-----------------------|-------|-----------------------------------|
| Before | 5.18 | 1.812                 | 106                   | 3.867 | .001                              |
| After  | 6.37 | 1.335                 |                       |       |                                   |

was due in part to the political nature of the enterprise as sex education programs and/or initiatives in the Philadelphia School system have evoked controversies (Harmon, 1977; Schogol, 1977). Consequently, many of the positive aspects of the course were not validated empirically.

This points to a larger problem in evaluating public school sex-education programs generally, that is: What has been taught? and given the specific social situation, What can be taught? In many instances, the curriculum for the course does not represent the scope of the course.

However, in this instance the school had the full support of the community; it was recognized by both parties that adolescent sexuality (Increased sexual activity, increased pregnancy) was becoming problematic. This situation has particularly severe implications for the black community in that it already lags behind the majority population in all those measures (income, education, and occupational level) that converge to connote a positive quality of life.

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